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ebtor 1 CHOISTOPHEN MICHAEL A	licus sa	econs .	Case number (if known)	17-002	156-00
	en e	2017 FEB -	-7 AM 11: 49		
7. Within 1 year before you filed for bankruptcy, did y Insiders include your relatives; any general partners; r corporations of which you are an officer, director, pers agent, including one for a business you operate as a s such as child support and alimony.	on in control, or	owner of 20% or r	nore of their voting	ൂഗ്ലവ are a gene securities; and a	ral partner; ny managing
☐ No ☐ Yes. List all payments to an insider.					
	Dates of payment	Total amount paid	Amount you still owe		
SACIC BARCIN Insider's Name	APRIL DOIL	\$ / (), (VS)()	* I I I I I I I	I woll	
2519 Sohn Boone Ct	<u>qus 201</u> 6	250 CA9H	,	Anound	HIS HOUSE V HOLP WITH
MT PLBASAUT SC 2946 State ZIP Code	6		/	PAYING L	SACE ALOAN STED ON THE
Insider's Name	P	\$		,	ALSO GAUE
Number Street			•	•	OUU CASH.
			- '	·	A INVESTER.
City Stale ZIP Code					NOT PAY AWY
Within 1 year before you filed for bankruptcy, did yo an insider? Include payments on debts guaranteed or cosigned by		ments or transfe	r any property on	account of a de	bt that benefited MCMS.
Yes. List all payments that benefited an insider.	Dates of payment	Total amount	Amount you still owe	Reason for this p	· ·
LynDA Hicks	SAN	\$4200_	\$_\&\).	Include creditor's DISNEY	WORLD
401 HARBOUR PLACE DR Number Street #1277	2017	•		WE SOLL	ARE D.V.C. DIN DEC-JAW E NEED ED
TAMPA FL 33602. State ZIP Code			M 45	ONEY -	I BROKE MY BL IN NOU
Insider's Name		\$	\$		or of work
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City

State

ZIP Code

Case 17-00256-dd Doc 22 Filed 02/07/17 Entered 02/08/17 12:10:07 Desc Main Page 2 of 2 Document Hophen Michael Hiche on Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed \_ To \_ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ No ☐ Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I upderstand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Yes. Name of person\_

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).